

RECEIVED

MAY 13 2021

RECEIVED

MAY 13 2021

IF YOUR CLAIM IS LISTED HERE, ONE OR MORE OF THE DEBTORS ARE SEEKING TO DISALLOW YOUR CLAIM FOR THE REASON LISTED BELOW.

NAME	CLAIM #	DATE FILED	DEBTOR	ASSERTED CLAIM AMOUNT
Universal Care Corporation	14706	5/23/2018	Commonwealth of Puerto Rico	\$1,558.13
Reason:	The claimant failed to provide prima facie evidence to support a secured claim.			

SI SU RECLAMO ESTÁ INCLUIDO AQUÍ, UNO O MÁS DE LOS DEUDORES SOLICITAN QUE SU RECLAMO SEA RECHAZADO POR LA RAZÓN INDICADA AQUÍ ABAJO.

NOMBRE	N.º DE RECLAMACIÓN	FECHA DE PRESENTACIÓN	DEUDOR	MONTO DE LA RECLAMACIÓN ALEGADA
Universal Care Corporation	14706	5/23/2018	Commonwealth of Puerto Rico	\$1,558.13
Base para:	El demandante omitió proporcionar pruebas evidentes para apoyar el reclamo asegurado.			





20 de febrero de 2019

Centro de Procesamiento de Información Complementaria del Estado Libre Asociado de PR  
850 3rd Avenue, Suite 412  
Brooklyn, NY 11232

A quien pueda interesar:

Estamos incluyendo las Evidencias de las siguientes reclamaciones:

1. Administración de Servicios Médicos de PR- Reclamación 6630
2. Centro Cardiovascular de PR y del Caribe- Reclamación 5480
3. Hospital Pediátrico Universitario-Reclamación 17
4. Hospital Regional de Bayamón- Reclamación 48
5. Hospital Universitario de Adultos- Reclamación 6537
6. Centro Comprensivo del Cancer-Reclamación 19609
7. Administración de Corrección- Reclamación 14706
8. Fondo del Seguro de Estado-Reclamación 20532
9. Departamento de Salud-Reclamación -29

Cualquier duda o información adicional, pueden comunicarse con nosotros al 787-798-2160 o correo electrónico [gloperena@unicarepr.com](mailto:gloperena@unicarepr.com)

Gracias,

A handwritten signature in blue ink, appearing to read "Ginnette M. Loperena Nigaglioni".

Ginnette M. Loperena Nigaglioni  
Gerente de Crédito

AP-IRR-L

Prime Clerk LLC  
(844) 822-9231 · [PRClaimsInfo@primeclerk.com](mailto:PRClaimsInfo@primeclerk.com)

NÚMERO DE EVIDENCIA DE RECLAMACIÓN EN VIRTUD DE LA LEY PROMESA: **14706**  
Nombre del Reclamante: **Universal Care Corporation**

**Complete y envíe este formulario hasta el 22 de febrero de 2019 inclusive**, por correo electrónico a [PRClaimsInfo@primeclerk.com](mailto:PRClaimsInfo@primeclerk.com) o por correo postal, entrega en mano o correo con entrega en 24 horas a la siguiente dirección:

Centro de procesamiento de información complementaria del Estado Libre Asociado de Puerto Rico  
850 3rd Avenue, Suite 412  
Brooklyn, NY 11232

Toda la información complementaria que proporcione se adjuntará a su reclamación y aparecerá en el registro oficial de reclamaciones.

Balance al 1/31/2019	AIJ009	\$1,235.87
	AIJ010	322.26

**FUNDAMENTO DE LA RECLAMACIÓN:**

- ☒ Una factura impaga que usted emitió al gobierno de Puerto Rico **Balance Total** **\$1,558.13**  
☐ Empleo actual o anterior en el gobierno de Puerto Rico  
☐ Otro (describir): \_\_\_\_\_

**PARA UNA FACTURA PENDIENTE:**

Número de proveedor / Número de identificación tributaria / Últimos cuatro dígitos del Número de seguro social: **660-42-0136**

El organismo o departamento gubernamental que celebró el (los) contrato(s) con usted: **ADMINISTRACION DE INSTITUCIONES**

**JUVENILES, DEPARTAMENTO DE CORRECTION / CORRECTIONAL DEPARTMENT**

Su(s) número(s) de contrato y/o número(s) de orden(es) de compra **Varías**

Proporcione la documentación de respaldo de su reclamación incluyendo una copia de todo contrato, orden de compra, factura (con inclusión de las fechas en que se prestaron los servicios y fechas de entrega de los bienes), conocimiento de embarque, y constancia de entrega).

**PARA EL EMPLEO ACTUAL O ANTERIOR:**

El organismo o departamento específico en el que trabaja o trabajó: \_\_\_\_\_

Período específico en el que estuvo, o está empleado en relación con la reclamación: \_\_\_\_\_

Los últimos cuatro dígitos de su número de seguro social: \_\_\_\_\_

Naturaleza de la reclamación relacionada con empleo:

- |                                              |                                                           |
|----------------------------------------------|-----------------------------------------------------------|
| <input type="checkbox"/> Jubilación          | <input type="checkbox"/> Queja con el sindicato           |
| <input type="checkbox"/> Salarios impagos    | <input type="checkbox"/> Acción legal pendiente o cerrada |
| <input type="checkbox"/> Días por enfermedad | <input type="checkbox"/> Otra: _____                      |
| <input type="checkbox"/> Vacaciones          | _____                                                     |

*[Continúa al dorso]*

STATEMENT



Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1  
DATE 1/31/2019  
ACCOUNT NO AIJ010

ATTN: ADM INST JUVENILES CTS ARECIBO  
PO BOX 71308  
SAN JUAN, PR 00936

AMOUNT DUE 322.26  
TERMS Net 30 Days

INVOICE DATE	INVOICE NO	TYPE	PO/CHECK NO	CHARGES	CREDITS	BALANCE
5/29/2014	431682	Inv	14RE0208	96.80	0.00	96.80
6/3/2014	432123	Inv	14RE0208	3,034.64	0.00	
10/6/2014	432123	Pmt	3175688	0.00	3,083.69	
	432123					<i>over payment</i> -49.05
6/10/2014	432583	Inv	14RE0208	99.49	0.00	99.49
6/12/2014	432770	Inv	14RE0208	122.76	0.00	122.76

Seriously past due. Please remit.  
Activity after 1/31/2019 will be reflected on your next statement.

CURRENT	31 - 60 DAYS	61 - 90 DAYS	OVER 90 DAYS	LATE CHARGES	AMOUNT DUE
0.00	0.00	0.00	270.00	52.26	322.26





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 5/29/2014  
INVOICE NO 431682

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ADM INST JUVENILES CTS ARECIBO  
PO BOX 60-307  
BAYAMON, PR 00960

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010001  
ADM INST JUVENILES CTS ARECIBO  
GLADYS ORTIZ  
L-V 8-3 CARR 2 BO SAN LUIS  
AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
ARECIBO,

TOTAL DUE 96.80

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
054		6/28/2014	5/29/2014	00056273	11/5/2013	5/29/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	14RE0208	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
3500-2B0063Q IV SOL'N DEXTROSE 5% 500ML IN WATER Lot No C931774	0	BX 24.0000	1.0000	1.0000	48.4000	48.40
3500-2B1323Q IV SOL'N NOR SAL 0.9% 500ML IN WATER Lot No C933481	0	BX 24.0000	1.0000	1.0000	48.4000	48.40
				1.0000		

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	96.80	0.00	0.00	0.00	96.80

TOTAL DUE 96.80

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.

**UNICARE**

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

BATCH CODE BATCHD ORDER NO 00056273 ORDER DATE 11/5/2013 PAGE 1

CUSTOMER PO NO  
14RE0208

05/22/2014 16:09:11 PM

S 010001  
H ADM INST JUVENILES CTS ARECIBO  
I GLADYS ORTIZ  
P L-V 8-3 CARR 2 BO SAN LUIS  
T AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
O ARECIBO,  
(787) 878-8330

S AIJ010  
O ADM INST JUVENILES CTS ARECIBO  
L PO BOX 60-307  
D BAYAMON, PR 00960  
T (787) 273-6464  
O

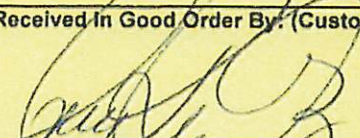
TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
054		UCCHQ	Our Truck	40321	5/22/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
3500-2B0063Q		BX	C931774 ✓	1.0000	1	
IV SOL'N DEXTROSE 5% 500ML		24.0000	MAY-15			
IN WATER						
3500-2B1323Q		BX	C933481 ✓	1.0000 X	1	
IV SOL'N NOR SAL 0.9% 500ML		24.0000	JUN-15			
IN WATER						

15-B-28n1

Blaguito/2015

Dispatched By/ Date:	Checked By/Date:	Delivered By/ Date/Time:	Packages Received:	Received in Good Order By: (Customer Signature)	Received By/ Date/Time:
uph.	Set		2		27/05/14

NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 6/10/2014  
INVOICE NO 432583

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ADM INST JUVENILES CTS ARECIBO  
PO BOX 60-307  
BAYAMON, PR 00960

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ADM INST JUVENILES CTS ARECIBO  
GLADYS ORTIZ  
L-V 8-3 CARR 2 BO SAN LUIS  
AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
ARECIBO,

TOTAL DUE 99.49

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
054		7/10/2014	6/10/2014	00056274	11/5/2013	6/13/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	14RE0208	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2804-81-002	1	BX	1.0000	1.0000	99.4900	99.49
IV ADM SET PRIMARY 1 INJ		100.0000				
Lot No 66281KS				1.0000		

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	99.49	0.00	0.00	0.00	99.49

TOTAL DUE 99.49

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

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BATCH CODE	ORDER NO	ORDER DATE	PAGE
0527BO	00056274	11/5/2013	1

CUSTOMER PO NO  
14RE0208

05/30/2014 09:52:59 AM

S 010001  
H ADM INST JUVENILES CTS ARECIBO  
I GLADYS ORTIZ  
P L-V 8-3 CARR 2 BO SAN LUIS  
T AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
O ARECIBO,  
(787) 878-8330

S AIJ010  
O ADM INST JUVENILES CTS ARECIBO  
L PO BOX 60-307  
D BAYAMON, PR 00960  
T (787) 273-6464  
O

TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
054		UCCHQ	Our Truck	40773	5/22/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
2804-81-002		BX	66281KS ✓	1.0000	1	
IV ADM SET PRIMARY 1 INJ		100.0000	2018-06			

Dispatched By/ Date:	Checked By/Date:	Delivered By/ Date/Time:	Packages Received:	Received In Good Order By: (Customer Signature)	Received By/ Date/Time:
<i>Wk</i>	<i>[Signature]</i>	<i>Wk</i>	①	<i>[Signature]</i>	6/10/14

NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 6/12/2014  
INVOICE NO 432770

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ADM INST JUVENILES CTS ARECIBO  
PO BOX 60-307  
BAYAMON, PR 00960

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010001  
ADM INST JUVENILES CTS ARECIBO  
GLADYS ORTIZ  
L-V 8-3 CARR 2 BO SAN LUIS  
AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
ARECIBO,

TOTAL DUE 122.76

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
054		7/12/2014	6/12/2014	00056809	6/2/2014	6/17/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	14RE0208	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2500-6725320110	0	EA	6.0000	6.0000	20.4600	122.76
PENICILLIN VK TAB 500MG FCO100		1.0000				
Lot No 343681662				6.0000		

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	122.76	0.00	0.00	0.00	122.76

TOTAL DUE 122.76

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.





<< CONDUCE >>

BATCH CODE 0603BO ORDER NO 00056809 ORDER DATE 6/2/2014 PAGE 1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO  
14RE0208

06/10/2014 07:27:33 AM

S 010001  
H ADM INST JUVENILES CTS ARECIBO  
I GLADYS ORTIZ  
P L-V 8-3 CARR 2 BO SAN LUIS  
T AL LADO GARAGE SHELL ANTIGUA CARCEL DISTRITO  
O ARECIBO,  
(787) 878-8330

S AIJ010  
O ADM INST JUVENILES CTS ARECIBO  
L PO BOX 60-307  
D BAYAMON, PR 00960  
T (787) 273-6464  
O

TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
054		UCCHQ	Our Truck	41542	6/2/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
2500-6725320110	EA		34 3681662	6.0000	6	0
PENICILLIN VK TAB 500MG FCO100	1.0000		9/20/14			

Dispatched By/ Date: <i>[Signature]</i> 6/11/2014	Checked By/Date: <i>[Signature]</i> 6/11/2014	Delivered By/ Date/Time: <i>[Signature]</i>	Packages Received: 1	Received In Good Order By (Customer Signature) <i>[Signature]</i>	Received By/ Date/Time: 6/12/14
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NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1  
DATE 1/31/2019  
ACCOUNT NO AIJ009

ATTN: ADM INST JUVENILES CTS HUMACAO  
DEPTO DE CORRECCION  
Y ADMINISTRACION  
PO BOX 71308  
SAN JUAN, PR 00936

AMOUNT DUE 1,235.87  
TERMS Net 30 Days

INVOICE DATE	INVOICE NO	TYPE	PO/CHECK NO	CHARGES	CREDITS	BALANCE
2/24/2014	425376	Inv	14CTH0163F	65.60	0.00	65.60
3/31/2014	427803	Inv	14CTH0201	248.04	0.00	248.04
9/16/2014	438861	Inv	15CTH0043-F	470.27	0.00	470.27
10/6/2014	440452	Inv	15CTH0043-F	67.44	0.00	67.44
6/30/2015	458217	Inv	15RE0462-F	577.81	0.00	
10/7/2015	458217	Pmt	3318701	0.00	264.41	
	458217					313.40

Seriously past due. Please remit.  
Activity after 1/31/2019 will be reflected on your next statement.

CURRENT	31 - 60 DAYS	61 - 90 DAYS	OVER 90 DAYS	LATE CHARGES	AMOUNT DUE
0.00	0.00	0.00	1,164.75	71.12	1,235.87



Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 2/24/2014  
INVOICE NO 425376

SOLD TO  
AIJ009  
ADM. INST JUVENILES CTS HUMACA  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

SHIPPED  
250001  
ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CTS HUMACAO EXP 30 DESPUES  
SALIDA YABUCOA LA SEGUNDA A LA DERECHA BO  
MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 65.60

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		3/26/2014	2/24/2014	00049595	2/11/2014	2/25/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	14CTH0163F	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2500-0641600610 ATROPINE INJ. 0.4MG/ML 20MLVIAL 10VL/BOX Lot No 043324	0	EA 1.0000	1.0000	1.0000  1.0000	65.6000	65.60

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	65.60	0.00	0.00	0.00	65.60

TOTAL DUE 65.60

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.



&lt;&lt; CONDUCE &gt;&gt;

UNICARE

BATCH CODE	ORDER NO	ORDER DATE	PAGE
BATCHD	00049595	2/11/2014	1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO  
14CTH0163F

02/14/2014 13:51:01 PM

S 250001  
H ADM INST JUVENILES CTS HUMACAO  
I JAIME L. HERNANDEZ DE LEON  
P CTS HUMACAO EXP 30 DESPUES  
T SALIDA YABUCOA LA SEGUNDA A LA DERECHA BO  
O MAMBICHE BLANCO  
HUMACAO, 00791  
(787) 285-0909

S AIJ009  
O ADM. INST JUVENILES CTS HUMACA  
L CENTRO TRATAMIENTO SOCIAL  
D HC-03 BOX 6739  
T HUMACAO, PR 00791  
O (787) 285-0909

TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
006		UCCHQ	Our Truck	33010	2/14/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
2500-0641600610		EA	043324	1.0000	1 vial	0
ATROPINE INJ. 0.4MG/ML		1.0000	4/2015			
20MLVIAL <del>10VL/BOX</del>						

Dispatched By/ Date: <i>[Signature]</i> 2/19/2014	Checked By/Date: <i>[Signature]</i> 2/19/2014	Delivered By/ Date/Time: <i>[Signature]</i>	Packages Received: 1	Received In Good Order By: (Customer Signature) <i>[Signature]</i> 2/24/14	Received By/ Date/Time: <i>[Signature]</i> 2/24/14
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NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA



Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 3/31/2014  
INVOICE NO 427803

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AIJ009  
ADM. INST JUVENILES CTS HUMACA  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

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250001  
ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CTS HUMACAO EXP 30 DESPUES  
SALIDA YABUCOA LA SEGUNDA A LA DERECHA BO  
MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 248.04

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		4/30/2014	3/31/2014	00051842	3/20/2014	3/27/2014	
TERMS DESCRIPTION		CUSTOMER PO NO		SHIP VIA			
Net 30 Days		14CTH0201		Our Truck			
ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION	
2500-0603334021 DIPHENYDRAMINE CAP 50MG FCO 100 Lot No 13J572	1	EA 1.0000	7.0000	7.0000	3.3700	23.59	
2500-00555030202 HYDROXYZ PAM CAP 500MG 100 TAB Lot No 34017713A	0	EA 1.0000	3.0000	3.0000	9.6400	28.92	
2500-0555032402 HYDROXYZINE PAM CAP 100MG FCO 100 Lot No 34018509A	0	EA 1.0000	4.0000	4.0000	37.6900	150.76	
500-6818035206 ERTRALINE TAB 50MG FCO30 Lot No G308773	0	EA 1.0000	3.0000	3.0000	2.4900	7.47	
500-6818035306 ERTRALINE TAB 100MG FCO 30 Lot No G309476 G309477	0	EA 1.0000	4.0000	4.0000	3.7600	15.04	
500-089634800200 ELATONIN 5MG S/L TAB 30+30 Lot No PN1557	1	EA 1.0000	2.0000	2.0000	11.1300	22.26	





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 2

INVOICE DATE 3/31/2014  
INVOICE NO 427803

SOLO  
AIJ009  
ADM. INST JUVENILES CTS HUMACAO  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

SHIP TO  
250001  
ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CTS HUMACAO EXP 30 DESPUES  
SALIDA YABUCOA LA SEGUNDA A LA DERECHA BO  
MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 248.04

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		4/30/2014	3/31/2014	00051842	3/20/2014	3/27/2014	
TERMS DESCRIPTION		CUSTOMER PO NO			SHIP VIA		
Net 30 Days		14CTH0201			Our Truck		
ITEM ID	TX CL		UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	248.04	0.00	0.00	0.00	248.04

TOTAL DUE 248.04

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.



&lt;&lt; CONDUCE &gt;&gt;

UNICARE

BATCH CODE	ORDER NO	ORDER DATE	PAGE
BATCHL	00051842	3/20/2014	1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO  
14CTH0201

03/20/2014 11:19:30 AM

S 250001  
H ADM INST JUVENILES CTS HUMACAO  
I JAIME L. HERNANDEZ DE LEON  
P CTS HUMACAO EXP 30 DESPUES  
T SALIDA YABUCOA LA SEGUNDA A LA DERECHA BO  
O MAMBICHE BLANCO  
HUMACAO, 00791  
(787) 285-0909

S AIJ009  
O ADM. INST JUVENILES CTS HUMACA  
L CENTRO TRATAMIENTO SOCIAL  
D HC-03 BOX 6739  
T HUMACAO, PR 00791  
O (787) 285-0909

TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
006		UCCHQ	Our Truck	35351	3/20/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
2500-0603334021		EA	135572	7.0000	7	0
DIPHENYDRAMINE CAP 50MG		1.0000	9/20/15			
FCO 100						
2500-00555030202		EA	340 17713A	3.0000	3	0
HYDROXYZ PAM CAP 500MG		1.0000	10/20/16			
100 TAB	Vino de 50mg.					
2500-0555032402		EA	340 18509A	4.0000	4	0
HYDROXYZINE PAM CAP 100MG		1.0000	12/20/16			
FCO 100						
2500-6818035206		EA	6308773	3.0000	3	0
SERTRALINE TAB 50MG FCO30		1.0000	8/20/16			
2500-6818035306		EA	6309476 (1)	4.0000	4	0
SERTRALINE TAB 100MG FCO 30		1.0000	9/20/16			
2500-089634800200		EA	PN 1557	2.0000	2	0
MELATONIN 5MG S/L TAB 30+30		1.0000	11/20/16			

Dispatched By/ Date:	Checked By/Date:	Delivered By/ Date/Time:	Packages Received:	Received In Good Order By: (Customer Signature)	Received By/ Date/Time:
3/20/2014	3/21/2014			W. V. of Doward	3/21/14

NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 9/16/2014  
INVOICE NO 438861

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AIJ009  
ADM. INST JUVENILES CTS HUMACA  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

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250001  
ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CARR 924 KM 4.5  
BO MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 470.27

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		10/16/2014	9/16/2014	00063252	8/11/2014	9/17/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	15CTH0043-F	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2500-06642402001 DIPHANYDRAMINE 25MG FCO 100 Lot No P13K425	1	EA 1.0000	3.0000	3.0000	3.2800	9.84
2500-0555032402 HYDROXYZINE PAM CAP 100MG FCO 100 Lot No 34019187A	0	EA 1.0000	3.0000	3.0000	71.9600	215.88
2500-6498016901 HYDROXIZINE PAM CAP 25MG FCO 100 Lot No A1467	0	EA 1.0000	3.0000	3.0000	8.1100	24.33
2500-4733590488 QUETIAPINE FUM TAB 100MG FCO100 Lot No GKN0732	0	EA 1.0000	5.0000	5.0000	11.1600	55.80
2500-4733590688 QUETIAPINE FUM 300MG FCO 100 Lot No GKN0661	0	EA 1.0000	3.0000	3.0000	33.8800	101.64
500-5011143301 RAZODONE HCL TAB 50MG CO 100 Lot No 3142054	0	EA 1.0000	5.0000	5.0000	3.4200	17.10
500-4733590388 QUETIAPINE FUM 50MG FCO 100 Lot No	0	EA 1.0000	2.0000	2.0000	10.3200	20.64



Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 2

INVOICE DATE 9/16/2014  
INVOICE NO 438861

**SOLD TO**  
AIJ009  
ADM. INST JUVENILES CTS HUMACA  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

**SHIP TO**  
250001  
ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CARR 924 KM 4.5  
BO MAMBICHE BLANCO  
HUMACAO, 00791

**TOTAL DUE** 470.27

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		10/16/2014	9/16/2014	00063252	8/11/2014	9/17/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	15CTH0043-F	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
GKM1891A GKN0940				1.0000 1.0000		
2500-2724100106 RISPERIDONE 1MG FCO 60 Lot No P12914A	0	EA 1.0000	4.0000	4.0000	6.2600	25.04
2500-4733573788 3UPROPION SR TAB 150MG CO 100 Lot No	1	EA 1.0000	4.0000	0.0000	16.8600	0.00

**PR SALES TAX**  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	470.27	0.00	0.00	0.00	470.27

**TOTAL DUE** 470.27

**IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.**



&lt;&lt; CONDUCE &gt;&gt;

UNICARE

BATCH CODE

ORDER NO

ORDER DATE

PAGE

Lopez

00063252

8/11/2014

1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO

15CTH0043-F

09/08/2014 13:15:33 PM

S 250001  
H ADM INST JUVENILES CTS HUMACAO  
I JAIME L. HERNANDEZ DE LEON  
P CARR 924 KM 4.5  
BO MAMBICHE BLANCO  
T HUMACAO, 00791  
O (787) 285-0909

S AIJ009  
O ADM. INST JUVENILES CTS HUMACA  
L CENTRO TRATAMIENTO SOCIAL  
D HC-03 BOX 6739  
T HUMACAO, PR 00791  
O (787) 285-0909

TERMS Net 30 Days

LS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
06		UCCHQ	Our Truck	48068	9/8/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
500-06642402001	IPHANYDRAMINE 25MG FCO 100	EA	1.0000 P13K 425 11/2016	3.0000	3	0
500-0555032402	YDROXYZINE PAM CAP 100MG CO 100	EA	1.0000 340 19187A 3/2017	3.0000	3	6
500-6498016901	YDROXIZINE PAM CAP 25MG CO 100	EA	1.0000 A1467 1/2014	3.0000	3	0
500-4733590488	UETIAPINE FUM TAB 100MG CO100	EA	1.0000 GKN 0732 4/2016	5.0000	5	0
500-4733590688	UETIAPINE FUM 300MG CO 100	EA	1.0000 GK N0661 4/2016	3.0000	3	0
500-5011143301	RAZODONE HCL TAB 50MG CO 100	EA	1.0000 314 2054 5/2016	5.0000	5	0
500-4733590388	UETIAPINE FUM 50MG FCO 100	EA	1.0000 (1) GK N0940 6/2016 U) GK M1841 A 11/2015	2.0000	2	0
500-2724100106	ISPERIDONE 1MG FCO 60	EA	1.0000 P1 2914 A 12/2015	4.0000	4	0
500-4733573788	UPROPION SR TAB 150MG CO 100	EA	1.0000	4.0000	0	4

Dispatched By/Date: 19/9/2014	Checked By/Date: 9/9/2014	Delivered By/Date/Time: W. Torres	Packages Received: 1	Received In Good Order By: (Customer Signature) [Signature]	Received By/Date/Time: 12-9-14
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NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 10/6/2014  
INVOICE NO 440452

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AIJ009  
ADM. INST JUVENILES CTS HUMACA  
CENTRO TRATAMIENTO SOCIAL  
HC-03 BOX 6739  
HUMACAO, PR 00791

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ADM INST JUVENILES CTS HUMACAO  
JAIME L. HERNANDEZ DE LEON  
CARR 924 KM 4.5  
BO MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 67.44

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
006		11/5/2014	10/6/2014	00063252	8/11/2014	10/14/2014	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	15CTH0043-F	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2500-0591354160	0	EA	4.0000	4.0000	16.8600	67.44
BUPROPION HCL SR 150MG		1.0000				
60 TABS						
Lot No 91257014				4.0000		

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	MISC	TOTAL
0.00	67.44	0.00	0.00	0.00	67.44
TOTAL DUE					67.44

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.





<< CONDUCE >>

BATCH CODE 0916BO ORDER NO 00063252 ORDER DATE 8/11/2014 PAGE 1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO  
15CTH0043-F

09/22/2014 09:20:55 AM

S 250001  
H ADM INST JUVENILES CTS HUMACAO  
I JAIME L. HERNANDEZ DE LEON  
P CARR 924 KM 4.5  
BO MAMBICHE BLANCO  
T HUMACAO, 00791  
O (787) 285-0909

S AIJ009  
O ADM. INST JUVENILES CTS HUMACA  
L CENTRO TRATAMIENTO SOCIAL  
D HC-03 BOX 6739  
T HUMACAO, PR 00791  
O (787) 285-0909

TERMS Net 30 Days

SLS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
006		UCCHQ	Our Truck	49071	9/8/2014	

ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
2500-4733573788	0591354160	EA	9125004 412046	4.0000	4	0
BUPROPION SR TAB 150MG						
FCO 100						

Dispatched By/ Date: 9/30/2014	Checked By/Date: 9/30/2014	Delivered By/ Date/Time: 10/3/14	Packages Received: 1	Received In Good Order By: (Customer Signature) R. L. S. S.	Received By/ Date/Time: 10/6/14
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NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 1

INVOICE DATE 6/30/2015  
INVOICE NO 458217

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AIJ009  
ADM INST JUVENILES CTS HUMACAO  
DEPTO DE CORRECCION  
Y ADMINISTRACION  
PO BOX 71308  
SAN JUAN, PR 00936

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ADM INST JUVENILES CTS HUMACAO  
LIC:17-B-0385 EXP: 09/20/17  
EXP 30 DESPUES SALIDA  
YABUCOA LA SEGUNDA A LA DERECHA BO  
MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 313.40

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
053		7/30/2015	6/30/2015	00081642	6/24/2015	6/30/2015	
TERMS DESCRIPTION		CUSTOMER PO NO		SHIP VIA			
Net 30 Days		15RE0462-F		Our Truck			
ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION	
2500-0591569460 MINOCYCLINE 50MG FCO 60 Lot No 1021187A	0	EA 1.0000	2.00	2.00	18.53	37.06	
2500-5974617306 PREDNISONE 10MG FCO 100 Lot No 15P0043	0	EA 1.0000	1.00	1.00	19.65	19.65	
2500-2930011101 LAMOTRIGINE 25MG FCO 100 Lot No GLEL14006	0	EA 1.0000	3.00	3.00	7.02	21.06	
2500-6642402101 DIPHENHYDRAMINE HCL 50MG FCO 100 Lot No P15B055	1	BTL 100.0000	10.00	10.00	3.37	33.70	
2500-04746904837 MELATONINA 5 MG FCO 100 Lot No 2060343	1	EA 1.0000	10.00	10.00	8.39	83.90	
2500-3172221430 SERTRALINE 100MG FCO 30 Lot No I1505195	0	EA 1.0000	7.00	7.00	13.08	91.56	
2500-6787724901 QUETIAPINE FUM IR 50MG FCO 100 Lot No 5140421	0	EA 1.0000	4.00	4.00	19.53	78.12	
				4.00			





Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

PAGE 2

INVOICE DATE 6/30/2015  
INVOICE NO 458217

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ADM INST JUVENILES CTS HUMACAO  
DEPTO DE CORRECCION  
Y ADMINISTRACION  
PO BOX 71308  
SAN JUAN, PR 00936

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250001  
ADM INST JUVENILES CTS HUMACAO  
LIC:17-B-0385 EXP: 09/20/17  
EXP 30 DESPUES SALIDA  
YABUCOA LA SEGUNDA A LA DERECHA BO  
MAMBICHE BLANCO  
HUMACAO, 00791

TOTAL DUE 313.40

SLS1	SLS2	DUE DATE	DISC DUE DATE	ORDER NO	ORDER DATE	SHIP DATE	SHIP NO
053		7/30/2015	6/30/2015	00081642	6/24/2015	6/30/2015	

TERMS DESCRIPTION	CUSTOMER PO NO	SHIP VIA
Net 30 Days	15RE0462-F	Our Truck

ITEM ID	TX CL	UNITS	ORDERED	SHIPPED	UNIT PRICE	EXTENSION
2500-6787724760 QUETIAPINE FUMARATE 300MG FCO 60 Lot No 4121862	0	EA 1.0000	4.00	4.00	34.32	137.28
2500-00555030202 HYDROXYZ PAM CAP 50MG 100 TAB Lot No 34018654A	0	EA 1.0000	4.00	4.00	18.87	75.48
				4.00		

PR SALES TAX  
0.00

We appreciate your business.

TAXABLE	NONTAXABLE	FREIGHT	SALES TAX	PARTIAL PAYMENT	TOTAL
0.00	577.81	0.00	0.00	(264.41)	313.40

TOTAL DUE 313.40

IMPORTANT: INTEREST AT THE HIGHEST RATE ALLOWED BY LAW WILL BE CHARGED ON PAST DUE INVOICES.



**UNICARE**

BATCH CODE

ORDER NO

ORDER DATE

PAGE

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00081642

6/18/2015

1

Universal Care, Corp.  
PO Box 1051  
Sabana Seca, PR 00952-1051  
PUERTO RICO  
(787)-798-2160

CUSTOMER PO NO

15RE0462-F

06/24/2015 13:57:46 PM

S 250001  
H ADM INST JUVENILES CTS HUMACAO  
I LIC:15-B-0385 EXP: 09/20/15  
P EXP 30 DESPUES SALIDA  
T YABUCOA LA SEGUNDA A LA DERECHA BO MAMBICHE  
O BLANCO  
HUMACAO, 00791  
(787) 285-0909

S AIJ009  
O ADM INST JUVENILES CTS HUMACAO  
L DEPTO DE CORRECCION  
D Y ADMINISTRACION  
T PO BOX 71308  
O SAN JUAN, PR 00936  
(787) 273-6464

TERMS Net 30 Days

LS1	SLS2	LOCATION ID	SHIP VIA	PICKING SLIP NO	REQ SHIP DATE	SHIP DATE
-----	------	-------------	----------	-----------------	---------------	-----------

53		UCCHQ	Our Truck	68923	6/24/2015	
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ITEM ID	Lotted Item	UNIT	QTY / LOT NUM	ORDERED	SHIPPED	BACKORDERED
500-0591569460	IIINOCYCLINE 50MG FCO 60	EA	1.0000 <u>102.1187A</u> <u>12/2017</u>	2.0000 ✓	<u>2</u>	<u>0</u>
500-5974617306	REDNISON 10MG FCO 100	EA	1.0000 <u>15P0043</u> <u>11/2017</u>	1.0000 ✓	<u>1</u>	<u>0</u>
500-29300111101	AMOTRIGINE 25MG FCO 100	EA	1.0000 <u>GLEEL14006</u> <u>5/2016</u>	3.0000 ✓	<u>3</u>	<u>0</u>
500-6642402101	IPHENHYDRAMINE HCL 50MG CO 100	BTL	100.0000 <u>PISBOSS</u> <u>2/2018</u>	10.0000 ✓	<u>10</u>	<u>0</u>
500-04746904837	IELATONINA 5 MG FCO 100	EA	1.0000 <u>2060343</u> <u>11/2018</u>	10.0000 ✓	<u>10</u>	<u>0</u>
500-3172221430	ERTRALINE 100MG FCO 30	EA	1.0000 <u>F1505195</u> <u>4/2018</u>	7.0000 ✓	<u>7</u>	<u>0</u>
500-6787724901	QUETIAPINE FUM IR 50MG CO 100	EA	1.0000 <u>5140421</u> <u>2/2017</u>	4.0000 ✓	<u>4</u>	<u>0</u>
500-6787724760	QUETIAPINE FUMARATE 300MG CO 60	EA	1.0000 <u>4121862</u> <u>10/2016</u>	4.0000 ✓	<u>4</u>	<u>0</u>
500-00555030202	YDROXYZ PAM CAP 50MG 00 TAB	EA	1.0000 <u>340186544</u> <u>2/2017</u>	4.0000 ✓	<u>4</u>	<u>0</u>

Dispatched By/ Date:	Checked By/Date:	Delivered By/ Date/Time:	Packages Received:	Received In Good Order By: (Customer Signature)	Received By/ Date/Time:
<i>[Signature]</i>	<i>[Signature]</i> 6/24/2015	<i>[Signature]</i>	1	<i>[Signature]</i> Gloria Sepulveda Perez	6/20/15

NO ACEPTAMOS RECLAMACIONES DESPUES DE DOS (2) DIAS DE RECIBIDA LA MERCANCIA



**CUSTOMER USE ONLY**

**FROM:** (PLEASE PRINT) \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

USPS Corporate Acct. No. \_\_\_\_\_ Federal Agency Acct. No. or Postal Service™ Acct. No. \_\_\_\_\_

**PAYMENT BY ACCOUNT (if applicable)**

**DELIVERY OPTIONS (Customer Use Only)**

☐ **SIGNATURE REQUIRED** Note: The mailer must check the "Signature Required" box if the mailer: 1) Requires the addressee's signature; OR 2) Purchases additional insurance; OR 3) Purchases COD service; OR 4) Purchases Return Receipt service. If the box is not checked, the Postal Service will leave the item in the addressee's mail receptacle or other secure location without attempting to obtain the addressee's signature on delivery.

**Delivery Options**

☐ No Saturday Delivery (delivered next business day)

☐ Sunday/Holiday Delivery Required (additional fee, where available\*)

☐ 10:30 AM Delivery Required (additional fee, where available\*)

\*Refer to USPS.com® or local Post Office™ for availability.

**TO:** (PLEASE PRINT) \_\_\_\_\_ PHONE ( ) \_\_\_\_\_

**ZIP + 4® (U.S. ADDRESSES ONLY)** \_\_\_\_\_



**UNITED STATES  
POSTAL SERVICE®**

**PRIORITY  
★ MAIL ★  
EXPRESS™**

**ORIGIN (POSTAL SERVICE USE ONLY)**

☐ 1-Day ☐ 2-Day ☐ Military ☐ DPO

**PO ZIP Code** \_\_\_\_\_ **Scheduled Delivery Date (MM/DD/YY)** \_\_\_\_\_ **Postage** \$ \_\_\_\_\_

**Date Accepted (MM/DD/YY)** \_\_\_\_\_ **Scheduled Delivery Time** ☐ 10:30 AM ☐ 3:00 PM ☒ 12 NOON **Insurance Fee** \$ \_\_\_\_\_ **COD Fee** \$ \_\_\_\_\_

**Time Accepted** ☐ AM ☒ PM **10:30 AM Delivery Fee** \$ \_\_\_\_\_ **Return Receipt Fee** \$ \_\_\_\_\_ **Live Animal Transportation Fee** \$ \_\_\_\_\_

**Weight** ☐ Flat Rate ☐ **Sunday/Holiday Premium Fee** \$ \_\_\_\_\_ **Total Postage & Fees** \$ \_\_\_\_\_

**Acceptance Employee Initials** \_\_\_\_\_

**DELIVERY (POSTAL SERVICE USE ONLY)**

**Delivery Attempt (MM/DD/YY)** \_\_\_\_\_ **Time** ☐ AM ☐ PM **Employee Signature** \_\_\_\_\_

**Delivery Attempt (MM/DD/YY)** \_\_\_\_\_ **Time** ☐ AM ☐ PM **Employee Signature** \_\_\_\_\_

- For pickup or USPS Tracking™, visit USPS.com or call 800-222-1811.
- \$100.00 Insurance Included.

LABEL 11-B, JANUARY 2014

PSN 7690-02-000-9988